

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	27		12-21
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		70029	3/8/02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim		Date	
Final	Original		
1	✓		
2	✓		
3	✓		
4	✓		
5	✓		
6	✓		
7	✓		
8	✓		
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46	✓		
47	✓		
48	✓		
49	✓		
50	✓		

Claim		Date	
Final	Original		
51	✓		
52	✓		
53	✓		
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97	✓		
98	✓		
99	✓		
100	✓		

BEST AVAILABLE COPY

Claim		Date	
Final	Original		
101			
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If more than 150 claims or 10 actions  
 staple additional sheet here

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